SCHEDULE B (FEC Form 3) Use seperate schedule(s)						FOR LINE NUMBER: PAGE 183 / 190								/ 190
IT	EMIZED DISBU	rs	for each category of the Detailed Summary Page			(check only	17 20a		18 20b	\square	9a [19b X 21		
	y Information copied from for commercial purposes													
\rangle	NAME OF COMMITTEE (In Full) SCHAKOWSKY FOR CONGRESS													
Α.	Full Name (Last, First, Middle Initial) FRIENDS OF SHERROD BROWN Mailing Address 2280 KRESGE DRIVE							Transaction ID: SB21.10757 Date of Disbursement 0 6 1 6 2 0 0 6						
	Suite 800							Amount of Each Disbursement this Period						
	City AMHERST	State OH	Zip Code 44001			Amo	unt o	f Each	Disbu	ırsem	ent this	Period		
	Purpose of Disbursement Contribution							1000.00 Refund or Disposal of Excess						
	Candidate Name SHERROD BROWN						Category/ Type	Contributions Required Under 11 C.F.R. 400.53						
	X	House Senate President rict: 00	Disburser	ment For: Primary Other (spe	2006 X General ecify) V									
В.	Full Name (Last, First, Middle Initial) FRIENDS OF TAMMY DUCKWORTH						Transaction ID: SB21.10760 Date of Disbursement M 5 M / D 1 5 / Y 2 0 0 6 Y							
	Mailing Address 416 W 22ND ST													
	City State Zip Code LOMBARD IL 60148							Amount of Each Disbursement this Period						Period
	Purpose of Disbursement Contribution									d or D				.00
	Candidate Name L. TAMMY DUCKWORTH						ategory/ Type	Contributions Required Under 11 C.F.R. 400.53						
		House Senate President	Disburser	nent For: Primary Other (spe	2006 X General ecify) ▼									
	State: IL Dist													
C.	Full Name (Last, First, Middle Initial) FRIENDS OF TAMMY DUCKWORTH							Transaction ID: SB21.10759 Date of Disbursement						
	Mailing Address 416 W 22ND ST													
	City State Zip Code LOMBARD IL 60148							Amount of Each Disbursement this Period						Period
	Purpose of Disbursement Contribution							1000.00 Refund or Disposal of Excess						.00
	Candidate Name L. TAMMY DUCKWORTH						ategory/ Type		contributions Required Under 1 C.F.R. 400.53					
		House Senate President	Disburser	ment For: Primary Other (spe	2006 X General ecify) ▼									
_	State: IL Dist	rict: 06			· , •									
s	UBTOTAL of Disbursen	nents This Page	(optional)				•						3000	.00

TOTAL This Period (last page this line number only)